| PATENT APPLICATION FEE DETERMINATION REC                               |   |   |              |                                      |                |   |                       |            |                      | Application or Docket Number |                            |                            |                        |
|--|---|---|--------------|--------------------------------------|----------------|---|-----------------------|------------|----------------------|------------------------------|----------------------------|----------------------------|------------------------|
|  |   |   | ctive Dec    |                                      |                | 10/                                       | 101 57363             |            |                      |                              |                            |                            |                        |
|  |   | CLA   | sa emi       | S FILED - PART I (Column 1)          |                |   | Column 2)             | •          | SMALL ENTITY TYPE    |                              | OTHER THAN OR SMALL ENTITY |                            |                        |
| U.S. NATIONAL STAGE FEES   |   |   |              | (Colum                               |                |   | outilit 6/            | 7          | RATE                 | FEE                          |                            | RATE                       | FEE                    |
| BASIC FEE  |   |   |              | ·                                    |                |   |                       | 7          | BASIC FEE            |                              | OR                         | BASIC FEE                  | 300                    |
| EXAMINATION FEE  |   |   |              |                                      |                |   |                       | 1          | EXAM FÉE             |                              |                            | EXAM. FEE                  | 200                    |
| SEARCH FEE   |   |   |              | -                                    |                |   | <del> </del>          | 1          | SEARCH FEE           |                              |                            | SEARCH FEE                 | 400                    |
| FEE FOR EXTRA SPEC. PGS.   |   |   | min          | us 100 =                             |                | / 60 =                                    | 7                     | X \$ 125 = |                      |                              | X \$ 250 =                 | 100                        |                        |
| TOTAL CHARGEABLE CLAIMS  |   |   | MS           | 7 m                                  | lnus 20 =      | •   |                       |            | X \$ 25 =            |                              | OR                         | X \$ 50 =                  |                        |
| NDEPENDENT CLAIMS  |   |   |              | 2                                    | ninus 3 =      |   |                       |            | X \$ 100 =           | ·                            | OR                         | X \$ 200 =                 |                        |
| WULT   | TIPLE DEPEND                                | ENT CL                                      | AIM PRE      | SENT                                 |                | <del></del>                               |                       |            | + \$ 180 =           |                              | OR                         | +\$360=                    |                        |
| If the difference in column 1 is less than zero, enter "0" in column 2 |   |   |              |                                      |                |   |                       | TOTAL      |                      | OR                           | TOTAL                      | 900                        |                        |
| 3  | CLAIMS AS (Column 1) CLAIMS REMAINING AFTER |   |              | (Column 2) HIGHEST NUMBER PREVIOUSLY |                |   | (Column PRESENT EXTRA |            | SMALL E              | ADDI-<br>TIONAL<br>FEE       | OR                         | OTHER I<br>SMALL E<br>RATE |                        |
| <b>MENDMENT</b>  | Total                                       |   | IDMENT       | Minus                                | PAIC           | FOR                                       |                       | -          | X \$ 25 =            | PEE                          | OR                         | X \$ 50                    | 2                      |
|  | Independent                                 | •   |              | Minus                                | <del> </del>   | 1   |                       | 7          | ¥\$ 100 =            |                              | OR                         | X 6 200 =                  | • -                    |
| 7  | FIRST PRESENTATION OF                       |   |              |                                      | PENDENT        | CLAIM                                     |                       | भ          | +\$ 180 =            |                              | OR                         |                            |                        |
| '  | L   |   |              |                                      |                |   |                       | لـــ       | TOTAL ADDIT.         |                              | OR                         | TOTAL ADDIT.               |                        |
|  |   |   |              |                                      |                |   |                       |            |                      |                              |                            |                            |                        |
| П.В  | 7-9-07                                      | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |              | HIG<br>NU<br>PREV                    |                | umn 2)<br>HEST<br>MBER<br>NOUSLY<br>D FOR | PRESEN<br>EXTRA       |            | RATE                 | ADDI-<br>TIONAL<br>FEE       |                            | RATE                       | ADDI-<br>TIONAL<br>FEE |
| ENDMENT 8  | Total                                       | •   | Z            | Minus                                | . 5            | 20  | • 0                   |            | X \$ 25=             |                              | OR                         | X \$ 50 =                  |                        |
| AMEN   | Independent                                 | •   | 7            | Minus                                | ••• 7          | 3   | - 4                   |            | X \$ 100 =           |                              | OR                         | X,\$ 200 =                 | 800                    |
| ੈ  | FIRST PRES                                  | IRST PRESENTATION OF                        |              | MULTIPLE DEPENDENT                   |                | CLAIM                                     |                       |            | +\$180=              |                              | OR                         | + \$ 360 =                 |                        |
|  | <del>- ,,, .</del>                          |   |              |                                      |                |   |                       |            | TOTAL ADDIT.         |                              | ОЯ                         | TOTAL ADDIT.               | Sook                   |
|  |   |   |              |                                      |                |   |                       |            |                      |                              |                            |                            | . 1                    |
|  | if the entry in col                         | lumo 1 lis                                  | less than th | e entry in colum                     | nn 2, write "C | T in colum                                | an 3.                 |            |                      |                              |                            |                            |                        |
| ::   | If the "Highest N" If the "Highest N        |   |              |                                      |                |   |                       |            |                      |                              |                            |                            | ,                      |
| i  | The "Highest M:                             | amber Pn                                    | wlously Pai  | d For (Total or                      | Independen     | D is the N                                | iahest number         | found tr   | n the appropriate bu | ax in columy                 | i 1.                       |                            |                        |